

**Emergency Care Authorization and Transportation Permission**  
**Consent & Release**

STUDENT’S FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

GENDER: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_ GRADE: \_\_\_\_\_ AGE: \_\_\_\_\_ CELL: \_\_\_\_\_

PARENT/GUARDIAN(S) NAME(S) \_\_\_\_\_ CELL/WORK/CONTACT PHONE #/S: \_\_\_\_\_

PARENT/GUARDIAN(S) NAME(S) \_\_\_\_\_ CELL/WORK/CONTACT PHONE #/S: \_\_\_\_\_

***PLEASE NOTE INFORMATION WE SHOULD KNOW ABOUT YOUR CHILD:***



PLEASE READ CAREFULLY AND SIGN BELOW:

I, \_\_\_\_\_ am the parent or legal guardian of \_\_\_\_\_ born on \_\_\_\_\_. I warrant that I possess all the rights, powers, and privileges of a parent or legal guardian necessary to execute this document with binding legal effect. As the parent or legal guardian, I certify and affirm that I have been completely and thoroughly informed that as a child attending a Children, Youth and Family (CYF) program, an entity of the Presbyterian Church of Jackson Hole, my child will participate in certain activities which carry with them a degree of risk and danger, INCLUDING BEING DRIVEN TO AND FROM THE PRESBYTERIAN CHURCH to various places associated with the CYF program. I consent to my child’s participation in these activities, including transportation from school to PCJH and from PCJH to another location of the CYF program (i.e. for field trips, camping trips, retreats, or special recreational, educational, mission or service project locations, and other special events, when applicable) and do hold harmless any individual, paid or volunteer, the organization and the Presbyterian Church of Jackson Hole as a whole. I acknowledge and understand that this PARENTAL AUTHORIZATION, CONSENT AND RELEASE has the same force and effect regardless of whether the activities engaged in are free or if a fee is charged.

Further, I personally assume, on my child's behalf, all risk in connection with said activities for any harm, injury or damages that may befall my child as a result of my child’s participation in the activities, whether foreseen or unforeseen, and I still wish to allow my child to proceed with the activities. In consideration of my child being allowed to participate in these activities and to use the Presbyterian Church of Jackson Hole, equipment and facilities, on behalf of my child, I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless the Presbyterian Church of Jackson Hole, it’s employees and volunteers from any and all claims, demands, or causes of action, which are in any way connected with my child’s participation in these activities or use the Presbyterian Church of Jackson Hole, equipment and facilities. I understand that it is my obligation to inform the church of any and all health considerations or medical conditions that would restrict my child’s participation in any and all activities while in the care of the Presbyterian Church of Jackson Hole. Should the need for medical attention arise the church will attempt to contact me as soon as practical under the circumstances.

In cases of emergency, I further consent to the examination or treatment of my child by a physician duly licensed to practice medicine or any health care professional duly licensed to provide health care, for medical care and services deemed necessary by the doctor, its agents, servants, and employees. I give permission to the doctor or health care professional to provide any and all medical care they deem, in their professional opinion, to be necessary. I agree to pay for any and all medical expenses incurred as a result of the use of this consent. I acknowledge by signing this document, that if anyone is hurt or property is damaged during my child’s participation in these activities, I may be found by a court of law to have waived my right to maintain a lawsuit against the church or any individual on the basis of any claim from which I have released them herein. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions remain in full force and effect. I have fully informed myself to the contents of this PARENTAL AUTHORIZATION, CONSENT AND RELEASE by reading it before I signed it.

\_\_\_\_\_  
Parent - Signature

\_\_\_\_\_  
Parent - Printed Name

\_\_\_\_\_  
Date

Name of Child: \_\_\_\_\_